

**Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions**

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<b>1. Agency Name</b> City of Costa Mesa		22 MAY 17 PM 2:54	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable)			
Designated Agency Contact (Name, Title) Brenda Green, City Clerk		CITY OF COSTA MESA BY	
Area Code/Phone Number 714-754-5221	E-mail brenda.green@costamesaca.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
		Date of Original Filing: _____ (month, day, year)	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 200

Event Description: Estrella Awards Date(s) 05 / 07 / 2022  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: Rocky Bandzeladze of Banc of California  
Name of Source

Was ticket distribution made at the behest of agency official? Yes  No  If yes: \_\_\_\_\_  
Official's Name (Last, First)

**3. Recipients**  
• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Stephens, John	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Performance of a ceremonial role or function representing the City at the event at the request of the event holder
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

**4. Verification**  
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Brenda Green Signature of Agency Head or Designee      Brenda Green Print Name      City Clerk Title      05/17/2022 (month, day, year)

Comment: \_\_\_\_\_